

Special event application

City of Kansas City, Mo.
Neighborhood and Community Services Department
Regulated Industries Division
635 Woodland Ave., Suite 2101
Kansas City, MO 64106
(816) 78

Name of the event (i.e., Rockfest)			
DBA name	nameApplicant's name		
	Managi	ng officer, sole owner, partner o	r corporate officer ONLY
Complete the following	lowing based on where the eve	ent will be held	
Business/Building name	Phone		
Address			
AddressStreet	City	State	ZIP
Property owner	Owner's day phone		
This event will be a [] public event [] priv	vate event (invitation only) Numb	er of attendees expected	l each day
Will an entry fee, admission charge, door charg no	ge, ticket sales or donations be take	n to attend the event?	[] yes []
List all that will be provided [] band	[] DJ [] dance area [] food [] tent	[] street closing
Date(s) of event	Time(s) of event		
Barricade [] plastic snow fence [] chain link	[] wood barricade [] steel bike	e racks [] other	
Location of event [] indoors [] outdoors []	commercial building [] other _		
Security will be [] armed [] unarmed N	Number of security officers who wi	ll be on site during the	event
Security company	Phone		
If the event will be held outdoors, list the numb	per of porta-potties that will be ons	ite during the event	
I, correct to the best of my knowledge and belief.	, do swear that the information	on given in this applicat	ion is true and
Signature of managing officer	Date		
Application processed by			
Application processed byCustomer Service	ce Representative	appneation completed _	
This application is hereby [] approved [] d	isapproved	Dat	te